RECEIVED FEC MAIL CENTER FEDERAL ELECTION COMMISSION JUN -6 PM 12: 00 WASHINGTON, D.C. 20463

RQ-7

May 3, 2016

MARCUS A. POUNCEY, TREASURER NWGA VOTES GOP 100 SMITH STREET NE ROME, GA 30161

IDENTIFICATION NUMBER: C00589978

REFERENCE: APRIL QUARTERLY REPORT (01/01/2016 - 03/31/2016)

Dear Treasurer:

It has come to the attention of the Federal Election Commission that you may have failed to file the above referenced report of receipts and disbursements or failed to file a report covering the entire reporting period as required by the Federal Election Campaign Act, as amended 52 U.S.C. §30104(a)

It is important that you file this report immediately with the Federal Election Commission, 999 E Street, N.W., Washington, DC 20463. Please note that <u>electronic filers must submit their reports electronically</u>, as per 11 CFR §104.18. A copy of the report or relevant portions must also be filed with the Secretary of State or equivalent State officer unless the State is exempt from the federal requirement to receive and maintain paper copies. You can verify the Commission's receipt of any documents submitted by your committee on the FEC website at www.fec.gov.

The failure to timely file a complete report may result in civil money penalties, an audit or legal enforcement action. The civil money penalty calculation for late reports does not include a grace period and begins on the day following the due date for the report. Due to heightened security screening measures, delivery of mail by the US Postal Service may be delayed. The Commission recommends that you submit your report via overnight delivery or courier service.

If you have any questions regarding this matter, please contact Marlene Colucci in the Reports Analysis Division on our toll free number (800)424-9530. The analyst's direct number is (202)694-1394.

FEC FORM 3X

0

03-00076697

Office

Use

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

REGEIVED FEC MAIL CENTER

2016 JUN - 6 PM 12: 00

FEC FORM 3X

Rev. 12/2004

TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. NWGA VOTES GOP BITIFIELT MA ADDRESS (number and street) Check if different than previously POME 13,0,1,6,11reported. (ACC) GA STATE A ZIP CODE A CITY A FEC IDENTIFICATION NUMBER ▼ **NEW AMENDED** 3. IS THIS OR REPORT (N) (A) 4. TYPE OF REPORT Nov 20 (M11) (Non-Election (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Report (Choose One) Year Only) Due On: Dec 20 (M12) Sep 20 (M9) Jun 20 (M6) Mar 20 (M3) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 01 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Signature of Treasurer Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

2016 - 06 - 06 - 08 - 00076698

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name NWGA VOTES GOP To: Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines

7. Total Disbursements (from Line 31).........

6(a) and 6(c) for Column B)

- Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....
- Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D)

252
0 0

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

20-6-06-06-03-00076699

NWGAU	OTES GOF
-------	----------

R	eport Covering the Period: From:		0.1	2016		То:	03'31'2016
	I. Receipts	_		COLUMN A otal This Period			COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:						
	(a) Individuals/Persons Other						
	Than Political Committees		<u> </u>		0	æ [
	(i) Itemized (use Schedule A)	المساح				٠ إ	
	(ii) Unitemized					i	
	(iii) TOTAL (add	مهاسما مهاسما				co_	
•	Lines 11(a)(i) and (ii)▶				0		
			7			0	
	(b) Political Party Committees						
	(c) Other Political Committees		- Andrewsky and American		Ω	رق	
	(such as PACs)(d) Total Contributions (add Lines					۲.	
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	general c	-	والمستوات	ر المعربة عندان		
	Totals to Line 33, page 5)	-			0	∞	
12.	Transfers From Affiliated/Other	ماسية	استان المساور			' <u>C</u>	
	Party Committees	ald square			. 0	æ	
		-	استقائی داند. په دوره دارده			W.	
13.	All Loans Received				0		
		-				F	
14.	Loan Repayments Received				_0	00	
15.	Offsets To Operating Expenditures	ilean mile				D.	
	(Refunds, Rebates, etc.)	being the		describer days from from the		ay [
	(Carry Totals to Line 37, page 5)				U	, _	
16.	Refunds of Contributions Made						
	to Federal Candidates and Other Political Committees		tan iliyama iliyamad	A Company	(7)	00	
17	Other Federal Receipts					′ [
	(Dividends, Interest, etc.)		and the same		0	00	
18.	Transfers from Non-Federal and Levin Funds	s ——	- 22				
	(a) Non-Federal Account	والمستحاد	المسرادة			M F	
	(from Schedule H3)			1 1 60 1 1 1 6 6	. 0	9	
	•					m [
	(b) Levin Funds (from Schedule H5)	1.			0	0	
		-				m [
	(c) Total Transfers (add 18(a) and 18(b))	1.			0	0	
						_	
10	Total Receipts (add Lines 11(d),					•	
٠5.	12, 13, 14, 15, 16, 17, and 18(c))			, <u> </u>		0	
						Ĺ	
20.	Total Federal Receipts	- management				CC/P	
	(subtract Line 18(c) from Line 19)▶				\mathcal{U}	, [
		E			اسبطست	i i	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

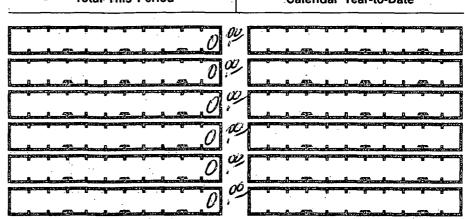
Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Inio Foresc	Valendar Tear-to-Date
	Activity (from Schedule H4)		
	(i) Federal Share	O.	
			e l
	(ii) Non-Federal Share	L	
	(b) Other Federal Operating Expenditures	0.4	
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	00	9
22.	Transfers to Affiliated/Other Party		
00	Committees	08	
23,	Contributions to Federal Candidates/Committees	00	e,
0.4	and Other Political Committees	0°	
	Independent Expenditures	O°	9
25.	(use Schedule E)		
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.0	
	(
26.	Loan Repayments Made	08	
		70	
27. 28.	Loans Made Refunds of Contributions To:		
	(a) Individuals/Persons Other Than Political Committees	0.0	
	man Folitical Committees		
	(b) Political Party Committees	00	
	(c) Other Political Committees		V. T.
	(such as PACs)	0	
	(d) Total Contribution Refunds	$\mathcal{O}^{\mathcal{C}}$	2
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements	06	
30.	Federal Election Activity (52 U.S.C. § 30101(20))	
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.3	
	(i) Federal Share		
	(ii) "Levin" Share	0,0	2
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.0	
	(c) Total Federal Election Activity (add	60	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	V.	
•	T. (D) () () () ()		
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))		
	23, 24, 25, 26, 27, 26(d), 29 and 50(c))		
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0.	

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

- 33. Total Contributions (other than loans)
 (from Line 11(d), page 3)
 34. Total Contribution Refunds
 (from Line 28(d))
- 35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶
- 37. Offsets to Operating Expenditures (from Line 15, page 3).....



* NOTE: THIS COMMITTEE HAS RECIEVED NO CONTRIBUTIONS
AT ALL, PERIOD. I AM CONSIDERING CLOSING IT PONN
IF THE ARE NONE FOR THE NEXT PERIOD.

Marcus AMES POUNCEY-TREASURER.

2016-06-06-03-00076701

2016 5	
06	
06	
07	
00076702	

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER:
ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)
TIEMIZED RECEIPTS	for each category of the	11a 11b

	FOF	LINE	NUM	1BER:	PAGE	:	0	F
eparate schedule(s)	(che	ck only	one) _				
ed Summary Page		11a		11b	11c		12	
		13	1	4	15		16	17

	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any phe name and address of any political committee	person for the purpose of soliciting contributions are to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NUGA VOTES GOP	MANUELY POUNCEY	
Full Name (Last, First, Middle Initial) A. 100 SM 1TH STREET AI Mailing Address 120ME City FEC ID number of contributing federal political committee.	### 3016 State Zip Code	Date of Receipt Man / Date / Yarray Amount of Each Receipt this Period
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼	Memo Item
Full Name (Last, First, Middle Initial) 3. Mailing Address City	State Zip Code	Date of Receipt Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼	
Mailing Address City	State Zip Code	Date of Receipt Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼]
	er only)	0 0

Detailed Summary Page 27 28a 28b 28c Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Full Name (Last, First, Middle Initial) Date of Disbursement NONE. Mailing Address City State Zip Code Purpose of Disbursement 2016-06-Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Memo Item Senate Primary General Other (specify) ▼ President State: District: 06 Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Memo Item Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Date of Disbursement Mailing Address City Zip Code State Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Memo Item General Senate Primary

Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s)

for each category of the

FOR LINE NUMBER:

22

23

(check only one)

21b

PAGE

24

OF

26

30b

SCHEDULE B (FEC Form 3X)

President

District:

State:

ITEMIZED DISBURSEMENTS

6016
06
06
00076704

ANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE OF FOR LINE 13 OF FORM 3X
ME OF COMMITTEE (IN FINANCES (Top		
LOAN SOURCE Full Nam	ne (Last, First, Middle Initial)	☐ Memo Item El	ection: Primary General
Mailing Address			Other (specify) ▼
City	State ZIP	Code	
Original Amount of Loan	Cumulative Payment		Outstanding at Close of This Period
TERMS Date incurre	Mark / Dab /	ue Interest Rate	Secured: % (apr) Yes No
1. Full Name (Last, First,	rantors (if any) to Loan Source Middle Initial)	Name of Employer	`
Mailing Address		Occupation	·
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed	
4. Full Name (Last, First, I	Middle Initial)	Outstanding:	en denomination de la company de la comp
Mailing Address	·	Occupation	
	·	Amount	
City	State ZIP Code	Guaranteed Outstanding:	
JBTOTALS This Period Thi	s Page (optional)		O
	ge in this line only)		O

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463			rage or somedule o		
NAME OF COMMITTEE (In Full)		FEC	IDENTIFICATION NUMBER		
NWGA VOTES GOP		C	00589978		
LENDING INSTITUTION (LENDER)	Amount of Loan	•	Interest Rate (APR)		
Full Name					
* /			<u> </u>		
Mailing Address		M M	/ 0 0 0 / 7 0 7 0 7 0 7		
•	Date Incurred or Established				
City State Zip Code	Date Due	м м	/ 6 6 /		
A. Has loan been restructured? No Yes	If yes, date originally incurred	M M	/ 0 0 / / / / / / / / / / / / / / / / /		
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	1 7			
C. Are other parties secondarily liable for the debt incur					
	nust be reported on Schedule C.)	What is the	value of this colletoral?		
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	of deposit, chattel papers,	vnat is the	value of this collateral?		
No Yes If yes, specify:	*	· · · · · · · · · · · · · · · · · · ·			
			nder have a perfected security		
E. Are any future contributions or future receipts of inte		terest in it			
	specify:	vnat is the	estimated value?		
		remokramikanski			
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:				
Date account established:	Address:				
Man / Ded / Yevey	City, State, Zip:				
F. If neither of the types of collateral described above w the loan amount, state the basis upon which this loa					
G. COMMITTEE TREASURER		DATE			
Typed Name	Typed Name				
Signature	·				
H. Attach a signed copy of the loan agreement.					
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the telephone.	terms of the loan and other informa	tion regard	ling the extension of the loan		
are accurate as stated above. II. The loan was made on terms and conditions (i similar extensions of credit to other borrowers of the conditions of the con	ncluding interest rate) no more favo	rable at th	e time than those imposed for		
III. This institution is aware of the requirement that complied with the requirements set forth at 11	t a loan must be made on a basis t	which assu	res repayment, and has		
AUTHORIZED REPRESENTATIVE	and the state of t	DATE			
Typed Name		N N	/ D D / Y TY TY TY		
Signature	Title				

2016-06-06-05-00076706

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	OF
FOR LI	E 30a OF FORM 3X

IAME OF COMMITTEE (In Full)				
NWGA VOTES GOP				
A. Full Name (Last, First, Middle Initial) / Full Organization Nam	ne	Type of Allocated Activit	·
* NONE.			Voter Registration Voter ID	GOTV Generic Campaign
Mailing Address			Allocated Activity or	Event Year-To-Date
City	State Zip Code	-		
Purpose of Disbursement		Category/ Type	Date M M / D	/ ٧٠٧٠٧
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL	_ AMOUNT
	0			
B. Full Name (Last, First, Middle Initial) / Full Organization Nam	e	Type of Allocated Activit	y or Event:
		_	Voter Registration Voter ID	GOTV Generic Campaign
Mailing Address			Allocated Activity or	Event Year-To-Date
City	State Zip Code		37	
Purpose of Disbursement		Category/ Type	Date / D	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL	. AMOUNT
C. Full Name (Last, First, Middle Initia) / Full Organization Nam	ne	Type of Allocated Activit Voter Registration Voter ID	y or Event: GOTV Generic Campaign
Mailing Address			Allocated Activity or	Event Year-To-Date
City	State Zip Code			
Purpose of Disbursement		Category/ Type	Date /	/ 7 7 7 7 7
FEDERAL SHARE	+	LEVIN SHALE	= TOTAL	AMOUNT
SUBTOTAL of Shared Federal and Levin	Activity This Page			
FEDERAL SHARE	· ·	LEVIN SHAF	= TOTAL	. AMOUNT
	0			_ 0 0
FOTAL This Period (last page for each lir FEDERAL SHARE	e only)(Federal share to	30(a)(i) and win share to 3		. AMOUNT
7	0	LEVIN SHAR		019
TOTAL This Period for the Levin Share		0		
			<u> </u>	

MIZED INDEPENDENT EXPENDIT	URES			PAGE FOR LINE	OF 24 OF FORM 3
ME OF COMMITTEE (In Full)	<u> </u>		. F	EC IDENTIFICAT	ION NUMBER 1
NWGA VOTES GOP				C0054	9978
ck if 24-hour report 48-hour report	ort New r	eport Amends repo	ort filed on	M / 0 0 /	
Full Name of Payee		☐ Memo	Item Date of	Public Distribution	n/Dissemination
NONE.				M / D D	, , , , , , , , , , , , , , , , , , ,
Mailing Address			Amount		Name and Association of States
City	State	Zip Code			
			Date of	Disbursement or	Obligation
Purpose of Expenditure		Category/ Type		M / D D	
Name of Federal Candidate		Support Oppose	Office Sought:		District:
Calendar Year-To-Date Per Election for Office Sought			Disbursement Oth	For: Primar ner (specify) ▶	ry Genera
Full Name of Payee		☐ Memo	Item Date of	Public Distributio	n/Dissemination
Mailing Address	<u> </u>		Amoun	t .	
City	State	Zip Code		- 45) A - 45)	1 1 1
Purpose of Expenditure		Category/ Type	Date o	Disbursement or	Obligation
Name of Federal Candidate		Support Oppose	Office Sought		District:
Calendar Year-To-Date		-	Disbursement		
Per Election for Office Sought				her (specify) ▶	<i>,</i>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....

Marca Q. Parago

ate 05 18 201

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) PAGE OF ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) Check if NWGA VOTES GOP 24-hour notice Has your committee been designated to make Full Name of Subordinate Committee coordinated expenditures by a political party committee? NO NO YES Mailing Address If YES, name the designating committee: City ZIP Code ☐ Memo Item Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure * NONE Category/ Type Mailing Address Date Zip Code City State Name of Federal Candidate Supported Office Sought: House State: Amount District: Senate Presidential Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure ☐ Memo Item Category/ Mailing Address Type Date Zip Code City State Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee ☐ Memo Item Category/ Type Mailing Address Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: Presidential Aggregate General Election Expenditure for this Candidate SUBTOTAL of Expenditures This Page (optional)..... TOTAL This Period (last page this line number only)......

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (IN FUII) NWGA VOTES GOP
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal%
Nonfederal%
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

2016 - 06 - 06 - 03 - 00076710

ACTIVITY IS:

___ Fundraising CHECK IF THE RATIO IS:

New

Direct Candidate Support

Same as Previously Reported

Revised

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS	PAGE OF
NAME OF COMMITTEE (In Full) NUGA VOSES GOP	
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.	
Methods of allocation:	
 FUNDRAISING activities are allocated using the "funds received method" where the fe expenses must equal the federal proportion of monies raised. 	deral proportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit experience where the federal proportion of disbursements is based on the benefit derived by federal tivity. For PACs Only: Direct candidate support includes public communications or vot federal and nonfederal candidates, regardless of whether there is a reference to a polare allocated using a time/space method.	ral candidates from the ac- er drives that refer to both
ACTIVITY OR EVENT IDENTIFIER	
ACTIVITY IS: V Fundraising	NONFEDERAL % NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER	
FEDERAL	% NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	% %
ACTIVITY OR EVENT IDENTIFIER	
FEDERAL	% NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	% %
ACTIVITY OR EVENT IDENTIFIER FEDERAL	% NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	% % % % % % % % % % % % % % % % % % %
ACTIVITY OR EVENT IDENTIFIER FEDERAL	e/ MONEEDEDAL or
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	% NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER	

NONFEDERAL %

FEDERAL %

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SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL
ALLOCATED FEDERAL / NONFEDE

ANSFERS FROM NONFEDERAL ACCOUNTS FOR LOCATED FEDERAL / NONFEDERAL ACTIVITY	PAGE OF
	FOR LINE 18a OF FORM 3X
ME OF COMMITTEE (In Full)	
NWGA VOTES GOP	
NAME OF ACCOUNT DATE OF RECEIPT N/A	TOTAL AMOUNT TRANSFERRED
NWG A VOJES GOP	0 :
BREAKDOWN OF TRANSFER RECEIVED	
i) Total Administrative	
·	
ii) Generic Voter Drive	0
	0
lii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
- Company of the Comp	00
a)	0
	- a
b)	.0
	0
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	·
	0
a)	.01,-
	00
b)	
c) Total Amount Transferred For Direct Candidate Support	0
of total Amount Transferred For Direct Canadate Support	
் vi) Public Communications Referring Only to Party (Made by PAC)	0
TOTALS FOR BREAKDOWN OF TRANSFER RECE	
TOTALS FOR BREAKBOWN OF THANSFER TIES	EIVED * THERE HAS BEEN NO
OTAL This Period (Administrative)	O = BEEN NO ACTIVITY
	THIS PERIOD
OTAL This Period (Generic Voter Drive)	0,40
	20 00
OTAL This Period (Exempt Activities)	6,5
	000
OTAL This Period (Direct Fundraising)	
Γ'	00
OTAL This Period (Direct Candidate Support)	
TOTAL This Posted (P. Mis Communication, P. C. 1	0,00
OTAL This Period (Public Communications Referring Only to Party)	
OTAL This Period (Total Amount Transferred)	12:4

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

To be used by State, District and Local Party Committees Only)	FOR LINE 186 OF FORM 3X
NAME OF COMMITTEE (In Full)	<u> </u>
NWGA VOTES GOP	
NAME OF ACCOUNT DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NWGA VOJES GOP	0,0
BREAKDOWN OF THIS TRANSFER	ATION * NOW E.
i) Voter Registration VOTER REGISTR	ATION 00
Total Amount Transferred for Voter Registration	0, -
ii) Voter ID	OTER ID
Total Amount Transferred for Voter ID	
iii) GOTV	GOTV
Total Amount Transferred for GOTV	GENERIC CAMPAIGN ACTIVITY
Iv) Generic Campaign Activity Total Amount Transferred for Generic Campaign Activity	O 00
· ·	· ·
NAME OF ACCOUNT DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
May / Bab / Agada	
BREAKDOWN OF THIS TRANSFER	
i) Voter Registration	ATION
Total Amount Transferred for Voter Registration	
ii) Voter ID	OTER ID
Total Amount Transferred for Voter ID	
iii) GOTV	GOTV
Total Amount Transferred for GOTV	GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity Total Amount Transferred for Campaign Activity	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity	
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (L	ast Page Only)
TOTAL This Period (Voter Registration)	
TOTAL This Period (Voter ID)	
TOTAL This Period (GOTV)	
TOTAL This Period (Generic Campaign Activity)	
TOTAL This Period (Total Amount of Transfers Received)	

2016-06-06-08-00076713

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF FORM 3X

NWGA VOTES GOP	
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE + LEVIN SHAF	
0	0
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	
Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE + LEVIN SHAF	RE = TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	
Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE + LEVIN SHAF	
SUBTOTAL of Shared Federal and Levin Activity This Page FEDERAL SHARE + LEVIN SHAF	RE = TOTAL AMOUNT
0	0,00
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and FEDERAL SHARE	TOTAL AMOUNT
LEVIN SHAF	RE O
TOTAL This Period for the Levin Share	FEC Schedule H6 (Form 3X) Rev. 12/2015

2016-06-06-03-00076713

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

NAM	IE OF COMMITTEE (In Full) JWG PY VOICES GOP			
NAM	NWGA VOTES GOP			
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE	
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)	D		
	(b) Unitemized			
	(c) Total	D _e	0.	OC
2.	OTHER RECEIPTS			
3.	TOTAL RECEIPTS(Add Lines 1c and 2)			
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)			
	(a) Voter Registration	0	0	
	(b) Voter ID	0		
	(c) GOTV		0	
	(d) Generic Campaign	0	0	
	(e) Total	0	0	
5.	OTHER DISBURSEMENTS	0	0	
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	0	0	
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	25 %	25	, eo
8.	RECEIPTS(from Line 3)	\mathcal{O}	0	
9.	SUBTOTAL(Add Lines 7 and 8)	250	25	00
10.	DISBURSEMENTS(From Line 6)	\mathcal{O}	0	
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	259		a

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

2016 - 06 - 06 - 08 - 00076715

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

 		~
1a		2

OF

PAGE

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) / Full Organization Name	☐ Memo Item	Date of Receipt
* MONE,		M - M / D - D / Y - Y - Y - Y - Y
Mailing Address		Amount of Each Receipt this Period
City State	Zip Code	Amount of Each Necept this Penou
Name of Employer or Principal Place of Business		Aggregate Year-to-Date
Occupation	- <u>-</u> -	0
Full Name (Last, First, Middle Initial) / Full Organization Name	☐ Memo Item	Date of Receipt
Mailing Address		
City State	Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business		Aggregate Year-to-Date
Occupation		Aggregate rear-to-bate
Full Name (Last, First, Middle Initial) / Full Organization Name	☐ Memo Item	Date of Receipt
		M M M / D U D / Y D Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State	Zip Code	
Name of Employer or Principal Place of Business		Aggregate Year-to-Date
Occupation		
Full Name (Last, First, Middle Initial) / Full Organization Name	☐ Memo Item	Date of Receipt
Mailing Address	;	
City State	Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business		Aggregate Year-to-Date
Occupation		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SUBTOTAL of Receipts This Page (optional)	<u> </u>	

2016:06:06:08:00076716

SCHEDULE L-B (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:	PAG	E	OF
(check only one)	4a 4b	4c 4d	5

ITEMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one) 4a 4c 5
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add		
NAME OF COMMITTEE (IN Full) NWGA VOTES GOB		
Full Name (Last, First, Middle Initial) / Full Organization Nam A. **NONE** **NONE	ne	Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Organization Nam B.	ne	Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Organization Nan	ne	Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Organization Nan D.	ne Memo Item	Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Organization Nam E.	ne	Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
SUBTOTAL of Disbursements This Page (optional)		0 0
TOTAL This Period (last page this line number only)		0,0

071S00729341 30161 000044471

RECEIVED FEG MAIL GENTER

FEDERAL ELECTION COMMISSION WASHINGTON, DC 20463 999 E STREET, NIN

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOM The FEC added this page to the end of this filing to indic	
Hand Delivered	Date of Receipt
USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	iness Day Delivery
Date of Recei Received from House Records & Registration Office	
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	of Receipt or Postmarked
PREPARER	6/6/16 DATE PREPARED
(3/2015)	